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**FACSIMILE TRANSMITTAL SHEET**

Deliver to: Examiner James D. Rutten, Art Unit 2122  
Firm Name: U.S. Patent & Trademark Office  
Fax Number: 703-746-7239  
From: John P. Ward Operator: Maureen R. Pettibone  
Date: December 30, 2004  
App. No.: 10/002,060  
No. of pages: 15 (including cover sheet)  
Client/Matter: 42P12718 Docket Date: 1/3/2004 Atty: JSH

Dear Examiner:

Please find the following document(s) attached:

- 1) Fee Transmittal (1 page)
- 2) Response to Office Action (13 pages)

Thank you.

CERTIFICATE OF TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.	
By: <u>Maureen R. Pettibone</u>	Date: <u>12/30/2004</u>
Maureen R. Pettibone	

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PTO/SB/17 (12-04)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**\$120.00****Complete if Known**

Application Number	10/002,060
Filing Date	October 31, 2001
First Named Inventor	Mason B. Cabot
Examiner Name	James D. Rutten
Art Unit	2122
Attorney Docket No.	42P12718

**METHOD OF PAYMENT (check all that apply)**
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 02-2866 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	50				
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =	x	200				
HP = highest number of independent claims paid for, if greater than 3						

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: One Month Extension of Time

**\$120.00****SUBMITTED BY**

Signature

Name (Print/Type) John Patrick WardRegistration No. 40,216  
(Attorney/Agent)Telephone 408-720-8300Date 12/30/04

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DEC 30 2004

10/002,060

Attorney Docket No.: 42P12718

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Mason B. Cabot et al.

Application No.: 10/002,060

Docket No.: 42P12718

Filed: Oct. 31, 2001

For: **STATISTICAL SAMPLING PROCESS**

Examiner: James D. Rutten

Art Unit: 2122

VIA FAX (703) 746-7239

**AMENDMENT AND RESPONSE AND  
PETITION FOR A ONE MONTH EXTENSION OF TIME**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 C.F.R. § 1.136(a), Applicants for the above-identified application respectfully petitions the Commissioner for a one (1) month extension of time, extending the period for response to January 3, 2005, from the Office Action dated Sep. 2, 2004. Please charge the petition filing fee of \$120.00 to Deposit Account No. 02-2666.

If it should be determined that a longer extension of time is required to prevent this application from being abandoned, please charge any additional fees to Deposit Account No. 02-2666. A copy of the Fee Transmittal is enclosed for deposit account charging purposes.

In response to the Office Action of Sep. 2, 2004, please reconsider the pending claims based on the following amendment.